Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishmen	t Name			Telephone Number	Date of	ID#	
RECBAR				Est 8127258138 Own (812) 697-0361	Inspection	"	
Address 336 PEARL S	T, NEW AI	LBANY	' IN 47150		07/09/2020		
Owner				Purpose	Follow Up	Released	
TONY THOM	IAS			X Routine	•	07/19/2020	
Owner's Add	ress			Follow-up			
87 CYNTHIA	S RIDGE F	FISHER	EVILLE, KY 40023	Complaint			
Person in Cha	arge						
MICHAEL W	/REGE			Pre-Operational			
Responsible P	Person's En	nail		Temporary	Menu Type		
MICHAEL@	RECBAR.	COM		НАССР	1 _ 2 _ 3 <u>X</u>	4 _ 5 _	
Certified Food				Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"							
Section #	C	NC	R Narrative	Narrative To Be Corrected			
188	Х		Measured proteins in hot holding wells a	t less than 60 degrees. Food was	CORRE	CTED	
			pulled and rapidly reheated to 135 minim				
191 X Observed in-house "chipotle ran							
438	Х		Discussed portion sizes with PIC and cook. Observed spray bottles throughout kitchen, hostess stand and upstair's bar CORRECTED				
	,,		lacking common name labels.				
443	Х		Measured quat. ammonia sanitizer bucket in kitchen at 500+ ppm. Target Should be 200ppm. CORRECTED			CTED	
324		Χ	Observed 3-comp sink hoses to be 10" too long. Cut to prevent CORRECTED backsiphonage.				
342		Χ	Observed poor water flow from kitchen h				
347		Χ	Observed no hand towel dispenser to be machine.	empty at handsink nearest dish CORRECTED			
413		Χ	Observed the back entrance to be broken unable to remain closed without deadbol				
Summary of Violations C 4 NC 4 R 0							
Received by (1	name and ti	tle prin	ted):	Inspected by (name and title printed):			
MICHAEL W	/REGE			A.J. Ingram CHIEF FOOD SPECIALIST			
Received by (s	signature):			Inspected by (signature):			
		-1/_					
cc:		cc:					